DATENT	APPI ICATION	<b>FEE DETERMINA</b>	TION RECORD
PAIRNI	APPLICATION	PER URIENBINA	HOH RECORE

Effective October 1, 2001

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Effective October 1, 2001						$\underline{\nu}$	<u> 120</u>	$\frac{\partial \mathcal{L}}{\partial \mathcal{L}}$	1010	100		
CLAIMS AS FILED - PART I (Column 1) (Column 2)				SMALI TYPE	EN	mry	OR	OTHER SMALL				
TOTAL CLAIMS		70					E	FEE	' '	RATE	FEE	
FO	FOR NUMBER FILED,		NUMB	BER EXTRA BASIC FE		FEE	370.00	OR	BASIC FEE	740.00		
TOTAL CHARGEABLE CLAIMS			. 70 minus 20= *		502	X\$ 9=			OR	. X\$18=	900	
INDEPENDENT CLAIMS			5 minus 3 = " 1)		X42			OR	X84=	168		
MU	MULTIPLE DEPENDENT CLAIM PRESENT					+140	=	•	OR	+280=		
* if	* If the difference in column 1 is less than zero, enter "0" in column 2					xolumn 2	·TOTA	L	•	OR	TOTAL	1202
071	CLAIMS AS AMENDED - PART II  OTTER OF (Column 1) (Column 2) (Column 3)					OTHER THAN SMALL ENTITY OR SMALL ENTITY						
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM	IEST IBER OUSLY FOR	PRESENT EXTRA	RATI		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE,
Z	Total	. 26	Minus	** 6	70	<b>-</b> Ø	X\$ 9	-		OR	X\$18=	
AME	Ind pendent	* 2:	Minus	SENDEN	5	= 0	X42=	•		OR	X84=	
Ш	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+140	<b>=</b> .	• .	OR	+280=		
							ADDIT, F			OR	/ TOTAL ADDIT, FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
AMENDMENT B.		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST HBER OUSLY FOR	PRESENT EXTRA	PATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N N	Total	•	Minus	**		•	X\$ 9	-		OR	X\$18=	
AME	Independent	NTATION OF M	Minus	PENDENT	T CL AIM	<u> </u>	X42=			OR	X84=	·
┞	THO THESE		JETH LE DE	CHOCK			+140:	•		OR	+280=	
							TOT ADDIT, F			OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=	X\$ 9=	. [		OR	X\$18=	
ME	Independent	*	Minus	***		-	X42=	1		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					╅		ŲΛ.				
١	d the nate in set	me t in lace then the	o ontor in and		a <b>"A"</b> la aci	hemo 3	+140=	L		OR	+280=	
***	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											